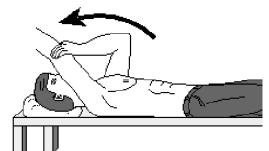
| Name: | | Date of Birth: | |
|------------|-------------------------------|----------------|--|
| Diagnosis: | Rotator Cuff Tear | Code:M75.100 | |
| Procedure: | Rotator Cuff Repair (Routine) | Surgery Date: | |

In order for University of Utah Health Care to complete this referral, please fax the patient's first consult notes to the University of Utah Orthopaedic Center at 801-581-4404. Thank you.

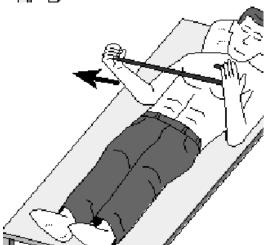
Timing of each phase varies based on individual patient factors, length of time immobilized, strength/ROM status, and expected performance/activity demands.

Phase I: Protected ROM (0 to 6 weeks)

- May remove dressing and shower post-operative day #3
- Sutures will be removed within 2 weeks at your first office visit
- Ice or cold flow systems encouraged for the first week at a minimum 3-4 times a day
- Sling should be worn at all times other than showering and doing exercises
- Start active scapular mobility exercises at 3-4 weeks. Keep the shoulder muscle relaxed
- Avoid all active and active assisted exercises until cleared by surgeon.
- Do not lift anything with the surgical arm
- Exercise program 3 times per day:
 - Immediate elbow, forearm, and hand range of motion out of sling
 - Pendulum exercises
 - Passive scapular plane elevation as tolerated (see picture)
 - o Passive external rotation of the shoulder as tolerated (see picture)



<u>Overhead reach</u>: Help lift your operative arm as high as it will go. Lie flat on your back, relax, and grasp the wrist of the surgical arm with the nonsurgical hand. Using only your non-surgical arm, raise the surgical arm up as far as it is comfortable for 10-20 seconds and return to the side again using the power of the non-surgical arm. Repeat 5-10 times



External rotation: Turn the arm out to the side while the elbow stays close to the body. This is best performed while lying on your back. Hone a cane, yardstick, broom handle, or dowel in both hands. Bend both elbows to a right angle. Use steady, gentle force from your normal arm to rotate the hand of the surgical shoulder out away from your body. Continue the rotation as far as it will go comfortable, holding for 10-20 seconds. Repeat 5-10 times.



Phase II: Progressive ROM (6 weeks to 12 weeks)

- Discontinue sling
- Lifting restriction of 5 lbs
- Start passive and active-assisted ROM as tolerated
 - o Start using pulleys, wand, and supine gravity assisted exercises as tolerated
 - o Emphasize all motions including IR behind the back at 10-12 weeks
- Isolate and strengthen scapular stabilizers (shrugs, etc.)
- Progress PROM and terminal capsular stretching of the shoulder as needed
- Avoid AROM in positions of subacromial impingement
- May start gentle rotator cuff strengthening at 8 weeks

Phase III: Strengthening (>12 weeks)

- No lifting restrictions
- Advance shoulder and rotator cuff strengthening as tolerated
 - o Therabands, dumbbells, Hughston's exercises, etc
 - Include home cuff strengthening program
 - Continue to emphasize scapular stabilizers
- Equate active and passive range of motion. Encourage scapulohumeral mechanics during active shoulder motion
- Simulate work/ recreations activities as rotator cuff strength and endurance improve
- Return to sport/heavy lifting work after strength returns to normal (minimum 4-5 months)

| Moda | alities | per T | herap | ist |
|-------|---------|-------|-------|-----|
| Freq: | 1-3x/ | week | (| |

Duration: 8-12 weeks